FULP RENTALS

Rental Application 812-379-4960

Property Address App	olying for:	D	ate
1. First Name	Middle	Last	
Birth Date		_Social Security #	
Telephone Number: (Home)	(Cell)	
2. First Name	Middle	Last	
Birth Date		Social Security #	
Telephone Number: (Home)	(Cell)	
Names/birth dates of a	all children or famil	y members that will be staying at residence:	
Current Address		Rent \$	
How long at this addre	ess R	eason for Moving	
Owner/ Manager for l	Reference	Phone	
Previous Address		Owner/Manager	
Applicant 1 Present E	mplover	How long	
Addross		Work Dhone	
Total Take Home Pay	(week/month)		
Previous Employer	· /	Work Phone	
Applicant 2 Present Ei	mplover	How long	
Address		Work Phone	
Total Take Home Pay	(week/month)		
Previous Employer		Work Phone	
Have vou ever been su	ed or evicted for no	n-payment of rent or breech of rental contract?	Yes/ No
		The state of the s	
Vehicle 1: Make	Year	License #	
Vehicle 2: Make	Year_	License # License #	
Personal reference		Relationship	
Address		Phone	
Emergency Contact (d	lifferent from Perso	nal Reference)Relation	nship
Address		Phone	
	you are declaring that th	e statements above are true and current, and I hereby author	rize verification of references,
review of statements, court i	records, and a credit chec	k at any time.	
Signed		Date	
Signed		Date	

This property requires a minimum 12 month occupancy under a lease. Landlord requires applicant to be employed for at least six months and to furnish a previous rental reference. NO SMOKING, PETS OR WATERBEDS allowed in rental unit.

*****Please print a copy for your records and click the submit button below****

